

**Electronic Filing System (EFS) Data**  
**Electronic Patent Application Submission**  
**USPTO Use Only**

EFS ID: 11176  
Application ID: 09681413  
Title of Invention: REINSURANCE AUCTION  
PROCESS  
First Named Inventor: Mark Lundegren  
Domestic/Foreign Application: Domestic Application  
Filing Date: null  
Effective Receipt Date: 2001-03-30  
Submission Type: Utility Patent Filing  
Filing Type: new-utility  
Confirmation Number: 0  
Attorney Docket Number: 01,152  
Digital Certificate Holder: cn=Kent Erickson, ou=Registered Attorneys, ou=Patent and  
Trademark Office, ou=Department of Commerce, o=U.S.  
Government, c=US  
Certificate Message Digest: ycceNS0cfMJ12o31Q56Zew==  
Total Fees Authorized: \$1078.0

Payment Category: CC - Credit Card  
Credit Card Number: \*\*\*\*\*4233  
Expiration Date: 02272002  
Card Holder Name: Shughart Thomson Kilroy  
RAM User ID: EFSPROD  
RAM Accounting Date: 2001-04-02  
RAM Sequence Number: 272185  
RAM Payment Status: RAM success  
Postal Code: 64105

# TRANSMITTAL FORM



Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number: 01,152

## REINSURANCE AUCTION PROCESS

First Named Inventor: Mark Lundegren

### SUBMITTED BY

Name: Kent R. Erickson Esq.  
Registration Number: 36793  
Electronic Signature Mark: Kent R. Erickson  
Date Signed: 20010330

*I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.*

*I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.*

### Attached Files:

specification	LUN152.xml
declaration	Lun152d1.tif
declaration	Lun152d1.tif
bibd-transmittal	LUN152apds.xml
fee-transmittal	LUN152fee.xml

Attached Image File(s):

Lun152d2.tif

Lun152d2.tif

Comments:

1. The first part of the document is a list of the names of the members of the committee who have been appointed to the various subcommittees. The names are listed in alphabetical order, and the subcommittees are listed in the order in which they were appointed. The names of the members of the committee are listed in the first column, and the names of the members of the subcommittees are listed in the second column. The names of the members of the committee are listed in the first column, and the names of the members of the subcommittees are listed in the second column.

DECLARATION AND POWER OF ATTORNEY  
FOR A PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled REINSURANCE AUCTION PROCESS, as described and claimed in the specification which is filed herewith.

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to in the oath or declaration.

I acknowledge the duty to disclose to the Patent and Trademark Office all information which is known to me to be material to the patentability of this application as defined in Title 37, Code of Federal Regulations, Sec. 1.56.

I hereby appoint Kent R. Erickson, Reg. No. 36,793; Malcolm A. Litman, Reg. No. 19,579; Gerald M. Kraai, Reg. No. 34,854; Mark E. Brown, Reg. No. 30,361; Mark L. Kleypas, Reg. No. 43,720; Marcia J. Rodgers, Reg. No. 33,765 all members of the bar of the State of Missouri, whose postal address is Shughart Thomson & Kilroy, P.C., Twelve Wyandotte Plaza, 120 West 12th Street, Kansas City, Missouri 64105, telephone (816) 421-3355;

and Cecilia Lofters, Reg. No. 33,434, whose postal address is GE Capital Corporation, 260 Long Ridge Road, Stamford, Connecticut 06927, telephone (203) 357-4547, as my attorneys, with full power of substitution, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent Office connected therewith in my behalf.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Date: MARCH 29, 2001

MARK E. LUNDEGREN

Mark E. Lundegren - Spelling corrected by  
Mark E. Lundegren Reg. No 367

Residence: 1630 Chicago Avenue, #2402, Evanston, Illinois  
60201

Post Office  
Address: 1630 Chicago Avenue, #2402, Evanston, Illinois  
60201

Citizenship: United States of America

# FEE TRANSMITTAL

Electronic Version 1.0.4

Stylesheet Version: 1.0

*Patent fees are subject to annual revisions on or about October 1st of each year.*

Large Entity

**TOTAL FEES AUTHORIZED: \$ 1078**

## BANK (CREDIT) CARD INFORMATION:

Credit Card Number: 4233  
Expiration Date: 20020227  
Authorized Name: Shughart Thomson Kilroy  
Billing Address: 64105

## BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 710

Subtotal For Basic Filing Fee: \$ 710

## EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 36	103	\$ 18	16	\$ 288
Independent Claims: 4	102	\$ 80	1	\$ 80

Subtotal For Extra Claims Fees: \$ 368

# FEE TRANSMITTAL

Electronic Version 1.0.4

Stylesheet Version: 1.0

*Patent fees are subject to annual revisions on or about October 1st of each year.*

Large Entity

**TOTAL FEES AUTHORIZED: \$ 1078**

## BANK (CREDIT) CARD INFORMATION:

Credit Card Number: 4233  
Expiration Date: 20020227  
Authorized Name: Shughart Thomson Kilroy  
Billing Address: 64105

## BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 710

Subtotal For Basic Filing Fee: \$ 710

## EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 36	103	\$ 18	16	\$ 288
Independent Claims: 4	102	\$ 80	1	\$ 80

Subtotal For Extra Claims Fees: \$ 368